



PLEASE RETURN APPLICATIONS TO:

1090 Legion Road
Detroit Lakes, MN 56501
Phone: 218-844-5378
Fax: 218-844-5379
info@broadwaywelding.com

APPLICATION FOR EMPLOYMENT

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Name _____ Date _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Office Phone _____ Other Phone _____
Email Address: _____ Social Security Number: _____

Position Sought: _____

Are you employed now? [] Yes [] No If so, may we inquire of your present employer? [] Yes [] No

Type of employment you are seeking: [] Full-time [] Part-time [] Other _____

Are you a US citizen, or otherwise authorized to work in the U.S. without any restriction? [] Yes [] No

Have you ever been involuntarily terminated or asked to resign from any position of employment? [] Yes [] No

If yes, please describe circumstances: _____

If selected for employment, are you willing to submit to a pre-employment drug screening test? [] Yes [] No

Emergency Contact: _____ Relationship _____

Phone Number: (____)____-____ Work Number: (____)____-____ Other: (____)____-____

EDUCATION

School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held: _____

List other information pertinent to the employment you are seeking:

HUMAN RESOURCES USE ONLY

Pay Rate: _____ Start Date: _____

Position: _____

EMPLOYMENT

(Most Recent First.)

1. Employer _____ Job Title _____
Dates Employed _____ Prior Position Held within Company (if any): _____
Address _____ City _____ State _____ Zip _____
Phone _____ Job Title _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____ May we contact this employer? Yes _____ No _____

2. Employer _____ Job Title _____
Dates Employed _____ Prior Position Held within Company (if any): _____
Address _____ City _____ State _____ Zip _____
Phone _____ Job Title _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____ May we contact this employer? Yes _____ No _____

3. Employer _____ Job Title _____
Dates Employed _____ Prior Position Held within Company (if any): _____
Address _____ City _____ State _____ Zip _____
Phone _____ Job Title _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____ May we contact this employer? Yes _____ No _____

4. Employer _____ Job Title _____
Dates Employed _____ Prior Position Held within Company (if any): _____
Address _____ City _____ State _____ Zip _____
Phone _____ Job Title _____ Supervisor _____
Starting Salary _____ Ending Salary _____
Duties Performed _____
Reason for Leaving _____ May we contact this employer? Yes _____ No _____

Please explain any gaps in employment history: _____

REFERENCES

Give the name of three persons NOT related to you, whom you have known at least one year

Name _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Office Phone _____ Other Phone _____

Name _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Office Phone _____ Other Phone _____

Name _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Office Phone _____ Other Phone _____